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CONFIRMATION NO. 2819

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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/US05/01225 01/13/2005
 which claims benefit of 60/560,745 01/13/2004

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 12/07/2007

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature _____ Initials _____		
STATE OR COUNTRY KS	SHEETS DRAWING 0	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 6

ADDRESS

21186

TITLE

CONTROLLED RELEASE CGRP DELIVERY COMPOSITION FOR CARDIOVASCULAR AND RENAL INDICATIONS

FILING FEE RECEIVED 1490	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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